Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	AMBER First name M Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	RICE Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7718	

Debtor 1 AMBER M RICE

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	2630 E Cheyenne Ave., #272	If Debtor 2 lives at a different address:
		North Las Vegas, NV 89030 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1 AMBER M RICE				Case number (if known)	
Par	t 2: Tell the Court About	our Bankruptcy	Case			
7.	The chapter of the Bankruptcy Code you are			of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for a box.	Bankruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how order. If yo	you may pay. Typid	cally, if you are paying the fee yo	with the clerk's office in your local court fo urself, you may pay with cash, cashier's ch alf, your attorney may pay with a credit card	eck, or money
					n, sign and attach the Application for Indivi	duals to Pay
		ŭ		(Official Form 103A). ved (You may request this option	only if you are filing for Chapter 7. By law,	a judge may.
		but is not applies to	required to, waive your family size and	our fee, and may do so only if you I you are unable to pay the fee in	ur income is less than 150% of the official prinstallments). If you choose this option, you also form 103B) and file it with your petition.	poverty line that bu must fill out
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
		Distri	ct	When	Case number	
		Distri	.ct	When	Case number	
		Distri	ct	When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debte	or		Relationship to you	
		Distri	ct	When	Case number, if known	
		Debte	or		Relationship to you	
		Distri	ct	When	Case number, if known	
11.	Do you rent your	■ No. Go	to line 12.			
	residence?	☐ Yes. Has	your landlord obtai	ned an eviction judgment against	you and do you want to stay in your reside	ence?
			No. Go to line 1	2.		
			Yes. Fill out <i>Init</i> bankruptcy petit		ludgment Against You (Form 101A) and file	it with this

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Deb	otor 1 AMBER M RICE				Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.			
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a	ip is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	ve	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of its, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	not filing under Chap	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	· Have An	, Hazardo	nus Property or Δn	ny Property That Needs Immediate Attention	
	Do you own or have any	■ No.	riazarac	ous i roperty of All	Ty Froperty That recess ininiculate Attention	
	property that poses or is					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 AMBER M RICE

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 AMBER M RICE				Case nu	umber (if known)	
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily money for a business or ir			ebts that you incurred to obtain business or investment.	
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	ou owe that are not consur	mer debts or bus	siness debts	
17.	Are you filing under	□ No.	I am not filing under Chap	oter 7. Go to line 18.			
	Chapter 7? Do you estimate that	Yes.	I am filing under Chapter	7. Do you estimate that at	fter any exempt	property is excluded and adminis	strative expenses
property is excluded and				available to distribute to	unsecured credi	itors?	
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000	
	you estimate that you owe?	□ 50-99		<u></u> 5001-10,000		<u> </u>	
	••••	□ 100-1 □ 200-9		☐ 10,001-25,0	00	☐ More than100,000	
19.	How much do you	\$ 0 - \$50,000		□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1	billion
	estimate your assets to be worth?		01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 11 - \$500 million	☐ \$10,000,000,001 - ☐ More than \$50 billi	
20.	How much do you estimate your liabilities	\$0 - \$	50,000	□ \$1,000,001		□ \$500,000,001 - \$1	
	to be?		001 - \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$ □ \$10,000,000,001 -	
			001 - \$500,000 001 - \$1 million)1 - \$100 million)1 - \$500 million		
Par	t 7: Sign Below						
For	you	I have ex	amined this petition, and I	declare under penalty of p	perjury that the i	nformation provided is true and o	correct.
						gible, under Chapter 7, 11,12, or d I choose to proceed under Cha	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					out this
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupt and 3571					
			BER M RICE R M RICE		Signature of D	Pebtor 2	
			e of Debtor 1		3		
		Executed	d on March 3, 2016		Executed on		
			MM / DD / YYYY			MM / DD / YYYY	

Debtor 1 AMBER M RICE

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Seth Ballstaedt, Esq.	Date	March 3, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Soth Pollotoodt For		
Seth Ballstaedt, Esq.		
Printed name		
Ballstaedt Law		
Firm name		
9555 S Eastern Ave. Ste #210		
Las Vegas, NV 89123		
Number, Street, City, State & ZIP Code		
Contact phone (702) 715-0000	Email address	help@bkvegas.com
11516		
Bar number & State		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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			J		
Filli	n this information to identify your case				
Debt	or 1 AMBER M RICE First Name	Middle Name	Last Name		
Debt		Middle Name	Last Name		
(Spou	se if, filing) First Name	Middle Name	Last Name		
Unite	ed States Bankruptcy Court for the: DIS	STRICT OF NEVADA			
Case	number				
(if kno				☐ Chec	k if this is an
				amer	ided filing
Off	icial Form 106Sum				
Sur	nmary of Your Assets and	Liabilities and	Certain Statistical Information		12/15
			filing together, both are equally responsible formation on this form. If you are filing amen		
	original forms, you must fill out a new			ueu scrieut	nes after you file
Part	1: Summarize Your Assets				
				Your a	acceta
					of what you own
1.	Schedule A/B: Property (Official Form 1	06A/B)			
	1a. Copy line 55, Total real estate, from S	schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property	from Schedule A/B		\$	15,302.00
	1c. Copy line 63, Total of all property on \$	Schedule A/B		\$	15,302.00
Part	2: Summarize Your Liabilities				
rait	Z. Summarize Tour Liabilities				
					i abilities nt you owe
2	Sahadula Di Craditara Wha Haya Claima	Coourned by Droporty (Off	inial Form 106D)		,
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		oottom of the last page of Part 1 of <i>Schedule D</i>	\$	14,747.00
3.	Schedule E/F: Creditors Who Have Unse	cured Claims (Official Fo	rm 106E/F)		
			om line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (no	npriority unsecured claim	s) from line 6j of Schedule E/F	\$	24,864.66
			Your total liabilities	s \$	39,611.66
Part	3: Summarize Your Income and Exp	enses			
4.	Schedule I: Your Income (Official Form 10	061)			
	Copy your combined monthly income from	n line 12 of Schedule I		\$	3,254.00
5.	Schedule J: Your Expenses (Official Form			c	3,243.00
	Copy your monthly expenses from line 22	c of Schedule J		\$	3,243.00
Part	4: Answer These Questions for Adm	inistrative and Statistic	al Records		
6.	Are you filing for bankruptcy under Ch ☐ No. You have nothing to report on the	• •	this box and submit this form to the court with y	our other sc	hedules.
	■ Yes				
7.	What kind of debt do you have?				
			s are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	r a personal	, family, or
	Your debts are not primarily cons the court with your other schedules.	umer debts. You have no	othing to report on this part of the form. Check th	is box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 AMBER M RICE Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 10-110	91-abi Doc 1	. Entered 03/03/16 05.	.52.36 Page 14	1 01 50	
Fill in this infor	mation to identify your	case and this filing:				
Debtor 1	AMBER M RICE					
D 1 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF NEV	ADA			
Case number						Chapte if this is an
Case number _					Ц	Check if this is an amended filing
Official Fo	rm 106A/B					
Schedul	e A/B: Prop	ertv				12/15
think it fits best. B	Be as complete and accura re space is needed, attach	ate as possible. If two r	only once. If an asset fits in more tha married people are filing together, bot is form. On the top of any additional p	h are equally responsible	for supply	ring correct
Part 1: Describe	Each Residence, Building	g, Land, or Other Real I	Estate You Own or Have an Interest In	1		
1. Do you own or I	have any legal or equitable	e interest in any reside	ence, building, land, or similar propert	y?		
■ No. Go to Pai	rt 2.					
☐ Yes. Where i						
Part 2: Describe	Your Vehicles					
			ny vehicles, whether they are reginated and contracts and contracts and contracts and contracts and contracts and contracts are contracts.		iny vehicl	es you own that
3. Cars, vans, tr☐ No☐ Yes	ucks, tractors, sport ut	tility vehicles, motor	cycles			
3.1 Make:	Dodge	Who has an	n interest in the property? Check one			or exemptions. Put
_	Journey	■ Debtor 1				aims on <i>Schedule D:</i> Secured by Property.
_	2010	Debtor 2		Current value of the		urrent value of the
Approximat Other infor			and Debtor 2 only one of the debtors and another	entire property?	pc	ortion you own?
	······		nic of the debtors and another	\$10.044	00	# 40.044.00
		Check if (see instru	this is community property uctions)	\$12,944.		\$12,944.00
Examples: Boa No Yes Add the dolla pages you ha Part 3: Describe	ats, trailers, motors, personal ar value of the portion value attached for Part 2.	onal watercraft, fishin you own for all of yo . Write that number l	eational vehicles, other vehicles, ag vessels, snowmobiles, motorcycle our entries from Part 2, including here	e accessories any entries for	port	\$12,944.00 Tent value of the ion you own? not deduct secured
6. Household a	oods and furnishings					ns or exemptions.
	ajor appliances, furniture	, linens, china, kitche	nware			

Official Form 106A/B Schedule A/B: Property

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D	ebtor 1	AMBER M RICE	Case number (if	known)
	■ Yes.	Describe		
		Household Goods		\$670.00
7.	Electror Exampl	nics es: Televisions and radios; audio, video, stereo, and digital e including cell phones, cameras, media players, games	equipment; computers, printers, scanners;	music collections; electronic devices
	■ No □ Yes.	Describe		
8.	Exampl	bles of value les: Antiques and figurines; paintings, prints, or other artwork other collections, memorabilia, collectibles	c; books, pictures, or other art objects; stam	np, coin, or baseball card collections;
	■ No □ Yes.	Describe		
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipm musical instruments	ent; bicycles, pool tables, golf clubs, skis; o	canoes and kayaks; carpentry tools;
		Describe		
10		ns oles: Pistols, rifles, shotguns, ammunition, and related equip	ment	
	■ No □ Yes.	Describe		
11	. Clothe Examp □ No	s bles: Everyday clothes, furs, leather coats, designer wear, sh	noes, accessories	
	Yes.	Describe		
		Clothes		\$1,500.00
12	■ No	y bles: Everyday jewelry, costume jewelry, engagement rings, Describe	wedding rings, heirloom jewelry, watches,	gems, gold, silver
13		rm animals oles: Dogs, cats, birds, horses		
	■ No □ Yes.	Describe		
14	. Any ot	her personal and household items you did not already li	st, including any health aids you did no	t list
		Give specific information		
15		the dollar value of all of your entries from Part 3, includinart 3. Write that number here		\$2,170.00
		scribe Your Financial Assets		
D	o you ov	vn or have any legal or equitable interest in any of the fo	llowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	☐ No	oles: Money you have in your wallet, in your home, in a safe		ur petition
	■ Yes			

Official Form 106A/B Schedule A/B: Property

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Debtor 1 AMBER M RICE			Case number (if known)			
					Cash on Hand	\$170.00
_	Examp _				certificates of deposit; shares in credit unions, brokerage houses, and o the same institution, list each.	ther similar
	I No ■ ∨es				Institution name:	
	- 165		17.1.	Prepaid Debit Card	Money Network account ending in #4023 (CURRENT EMPLOYER CARD)	\$5.00
			17.2.	Prepaid Debit Card	Money Network account ending in #0523 (OLD EMPLOYER CARD)	\$5.00
			17.3.	Prepaid Debit Card	Direct Express account ending in #5168 (SSI STATEMENTS)	\$7.00
			17.4.	Prepaid Debit Card	Chase account ending in #7420 (CHILD SUPPORT)	\$1.00
	Examp No Yes	oles: Bond funds, i	nvestm	Institution or issuer name	ge firms, money market accounts : d and unincorporated businesses, including an interest in an LLC, p	partnershin and
	joint ve ■ No	enture		·	and unincorporated businesses, including an interest in an LLO, p	zartnersnip, and
	☐ Yes.	Give specific info		about them me of entity:	% of ownership:	
_	Negotia	able instruments i	nclude p	personal checks, cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
_	_	Give specific infor		about them uer name:		
	<i>Examp</i> ∃ No		RA, ERI	SA, Keogh, 401(k), 403(b)	, thrift savings accounts, or other pension or profit-sharing plans	
	Yes. I	List each account		tely. of account:	Institution name:	
			Pens	ion	Culinary	Unknown
_	Your sh		deposi	ts you have made so that	you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies, or others	
_	_				Institution name or individual:	
	No	•	·		ou, either for life or for a number of years)	
	☐ Yes	Issı	uer nam	e and description.		
2		s in an education C. §§ 530(b)(1), 52			ed ABLE program, or under a qualified state tuition program.	
•	- INO					

Official Form 106A/B Schedule A/B: Property page 3

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☐ Yes	Institution name and description. Separately	file the records of any intere	sts.11 U.S.C. § 521(c):	
_	future interests in property (other than any	thing listed in line 1), and	rights or powers exercisable f	or your benefit
■ No □ Yes. Give specific	information about them			
	, trademarks, trade secrets, and other intel	ectual property		
Examples: Internet of	domain names, websites, proceeds from royalt		ts	
■ No ☐ Yes Give specific	information about them			
·	es, and other general intangibles			
Examples: Building	permits, exclusive licenses, cooperative assoc	iation holdings, liquor licens	es, professional licenses	
■ No ☐ Yes Give specific	information about them			
			Curr	ent value of the
Money or property owe	ea to you?		port i Do n	ion you own? ot deduct secured as or exemptions.
28. Tax refunds owed t o □ No	o you			
	information about them, including whether you	already filed the returns an	d the tax years	
	•	·	-	
	Tax Refund		_	Unknown
			1	
	Tax Refund Earned I	ncome Credit		Unknown
	<u> </u>		-	
29. Family support Examples: Past due	or lump sum alimony, spousal support, child s	support, maintenance, divord	ce settlement, property settlemen	ıt
■ No	on tamp cann aminory, operation cappers, come of	apport, maintenance, arron	o como man, property como men	
☐ Yes. Give specific	information			
30. Other amounts som	noona awas you			
Examples: Unpaid w	vages, disability insurance payments, disability	benefits, sick pay, vacation	pay, workers' compensation, Sc	ocial Security
■ No	unpaid loans you made to someone else			
☐ Yes. Give specific	information			
31. Interests in insuran		(110A) and (11 become		
Examples: Health, d ☐ No	lisability, or life insurance; health savings acco	unt (HSA); credit, nomeown	ers, or renters insurance	
Yes. Name the inst	urance company of each policy and list its valu			
	Company name:	Beneficiar	y: Sur valu	render or refund ue:
	Term Life with Culinary Union			Unknown
If you are the benefi	perty that is due you from someone who ha ciary of a living trust, expect proceeds from a l	s died ife insurance policy, or are c	currently entitled to receive prope	rty because
someone has died. No				
- INU				

 $\hfill\square$ Yes. Give specific information..

Deb	otor 1	AMBER M RICE		Case number (if known)	
33.		against third parties, whether or not you have filed a law oles: Accidents, employment disputes, insurance claims, or rig		and for payment	
	No				
L	┛Yes.	Describe each claim			
_	Other o	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to set	off claims
	☐ Yes.	Describe each claim			
35.	Any fin	nancial assets you did not already list			
	No				
	☐ Yes.	Give specific information			
36.		the dollar value of all of your entries from Part 4, includin art 4. Write that number here		ges you have attached	\$188.00
Part	5: De:	scribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. [Do you d	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	Go to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
		_			
Part	: 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.		have other property of any kind you did not already list? coles: Season tickets, country club membership	?		
	No				
L	J Yes.	Give specific information			
54.	Add t	the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
		,		_	
Part	8:	List the Totals of Each Part of this Form			
55	Part 1	1: Total real estate, line 2			\$0.00
55. 56.		2: Total vehicles, line 5	\$12,944.00		\$0.00
57.		3: Total vericies, line 5	\$2,170.00		
58.		4: Total financial assets, line 36	\$188.00		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.		7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$15,302.00	Copy personal property total	\$15,302.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$15,302.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor				
Debtor 1	AMBER M RICE			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods Line from Schedule A/B: 6.1	\$670.00		\$670.00	Nev. Rev. Stat. § 21.090(1)(k
Ellio Holli Gonedale / V.Z. G. I			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	Nev. Rev. Stat. § 21.090(1)(I
Line Horr Schedule A/D.			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B: 16.1	\$170.00		\$170.00	Nev. Rev. Stat. § 21.090(1)(2
Line Horr Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
Prepaid Debit Card: Money Network account ending in #4023 (CURRENT	\$5.00		75%	Nev. Rev. Stat. § 21.090(1)(
EMPLOYER CARD) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Prepaid Debit Card: Money Network account ending in #4023 (CURRENT	\$5.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(2
EMPLOYER CARD) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

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Deptor 1 ANIBER IN RICE			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption
Prepaid Debit Card: Money Network account ending in #0523 (OLD EMPLOYER CARD) Line from Schedule A/B: 17.2	\$5.00	■	75% 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)
Prepaid Debit Card: Direct Express account ending in #5168 (SSI	\$7.00	•	\$7.00	42 U.S.C. § 407
STATEMENTS) Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Prepaid Debit Card: Chase account ending in #7420 (CHILD SUPPORT)	\$1.00		75%	Nev. Rev. Stat. § 21.090(1)(g)
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
Pension: Culinary Line from Schedule A/B: 21.1	Unknown		100%	Nev. Rev. Stat. § 21.090(1)(r)
Line nom ocheane AB. 2111			100% of fair market value, up to any applicable statutory limit	
Tax Refund Line from Schedule A/B: 28.1	Unknown		\$1,000.00	Nev. Rev. Stat. § 21.090(1)(z)
Line Holli Gelledale PVB. 20.1			100% of fair market value, up to any applicable statutory limit	
Tax Refund Earned Income Credit Line from Schedule A/B: 28.2	Unknown		100%	Nev. Rev. Stat. § 21.090(1)(aa)
Ellie Holli Gelledale PAB. 2012			100% of fair market value, up to any applicable statutory limit	
Term Life with Culinary Union Line from Schedule A/B: 31.1	Unknown		100%	Nev. Rev. Stat. § 687B.280
Ellio Italii esiisaale 702. e 111			100% of fair market value, up to any applicable statutory limit	
 3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every ■ No 			led on or after the date of adjustmer	ıt.)
☐ Yes. Did you acquire the property cover☐ No☐ Yes	ed by the exemption wi	ithin 1	,215 days before you filed this case?	?

	Case 16-110	91-abi D0C1	Entered 03/03/1	10 05.52.38	Page 21 01 50	
Fill in this informa	ation to identify you	r case:				
Debtor 1	AMBER M RICE					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	kruptcy Court for the:	DISTRICT OF NEVA				
	. ,					
Case number					Charle	if their in our
(ii kilowii)					_	if this is an led filing
						Ü
Official Form	106D					
Schedule [D: Creditors	Who Have Cla	aims Secured	by Property	/	12/15
Re as complete and	accurata as nossible l	f two married people are fil	ing together, both are equ	ally responsible for su	nnlying correct informs	tion If more space
		out, number the entries, and				
, ,	ave claims secured by	vour property?				
`	-	nis form to the court with y	our other schedules. Vo	u have nothing else to	report on this form	
_		Ĩ	roul other schedules. To	u nave nothing else to	report on this form.	
	all of the information I	Delow.				
<u> </u>	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, a particular claim, list the oth		Amount of claim	Value of collateral	Unsecured
		cal order according to the cre		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Autoworld	Sales and	.		\$14,747.00	\$12,944.00	\$1,803.00
Leasing Creditor's Name		Describe the property tha		Ψ14,747.00	\$12,944.00	Ψ1,803.00
Oreallor 3 Name		2010 Dodge Journey	y 120000 miles			
		As of the data you file the	o oloim io. Chaelt all that			
1562 N Nell	•	As of the date you file, the apply.	e Claim is. Check all that			
Las Vegas,	·	Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	t2 Charle and	Disputed Nature of lien. Check all t	hat apply			
_	it! Check one.	_		ırod		
■ Debtor 1 only		car loan)	e (such as mortgage or secu	irea		
☐ Debtor 2 only		, , , , ,				
☐ Debtor 1 and Deb	,	☐ Statutory lien (such as to	· ·			
	e debtors and another	☐ Judgment lien from a la				
Check if this clai		☐ Other (including a right	to offset)			
Date debt was incur	red 02/2016	Last 4 digits of acc	count number 6329			
Add the dollar value	ue of your entries in C	olumn A on this page. Write	e that number here:	\$14,74	7.00	
	age of your form, add	the dollar value totals from		\$14,74		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ca	3Se 10-1109	1-abi Di	oc i Ente	reu 03/03/	/10 05.52.38	Page 22 01 :	50
Fill in	this information	to identify your	case:					
Debtor	· 1 💮 🗛 N	IBER M RICE						
Dobioi		Name	Middle Na	me	Last Name			
Debtor								
(Spouse	if, filing) First	Name	Middle Na	me	Last Name			
United	States Bankrupto	cy Court for the:	DISTRICT O	F NEVADA				
Case n	number							
(if known				-			_ c	heck if this is an
							aı	mended filing
Offici	ial Form 10	3E/E						
		<u>⊃⊏</u> /⊏ Creditors W	ho Hayo	l Incocuro	d Claime			12/15
						Dort 2 for anaditors wit	h NONDDIODITY eleit	ns. List the other party to
Schedul left. Atta	le D: Creditors Wh	o Have Claims Sector on Page to this pag	ured by Property	y. If more space is	s needed, copy		it out, number the ent	that are listed in cries in the boxes on the ional pages, write your
Part 1:	List All of Yo	our PRIORITY Un	secured Clain	ns				
1. Do	any creditors have	e priority unsecured	d claims agains	t you?				
	No. Go to Part 2.							
	Yes.							
Part 2:	List All of Yo	our NONPRIORIT	Y Unsecured	Claims				
3. Do	any creditors have	e nonpriority unsec	ured claims aga	ainst you?				
	No. You have nothi	ng to report in this pa	art. Submit this fo	orm to the court wit	th your other sche	edules.		
	Yes.							
4. Lis	t all of your nonpr	iority unsecured cla	aims in the alph	abetical order of	the creditor who	holds each claim. If a	a creditor has more that	n one nonpriority
uns	secured claim, list th	e creditor separately	/ for each claim. I	For each claim liste	ed, identify what t	type of claim it is. Do not three nonpriority unsec	t list claims already inc	luded in Part 1. If more
Par		a particular ciairii, ii	st the other credi	iors in r ant o.ii you	u nave more man	timee nonphonty unsec	died claims illi odi trie	Continuation rage of
								Total claim
4.1	Aargon Colle			Last 4 digits of ac	count number	2177		\$42.00
	Nonpriority Credit		,	When was the de	ht incurred?	Opened 12/12/1	1	
	Las Vegas, N			Tillon was the as	or mountou.	Opened 12/12/1	•	
	Number Street Ci			As of the date you	u file, the claim i	is: Check all that apply		
	Who incurred the	e debt? Check one.						
	Debtor 1 only			☐ Contingent				
	Debtor 2 only			☐ Unliquidated				
	Debtor 1 and I	· ·	_	Disputed				
		the debtors and and		Type of NONPRIC	ORITY unsecured	d claim:		
	☐ Check if this debt	claim is for a comm	ilullity	Student loans	ning out of	votion cores "	romon that were all all as t	
	Is the claim subj	ect to offset?		■ Obligations aris report as priority cl		aration agreement or div	orce that you did not	
	■ No			Debts to pension	on or profit-sharin	ng plans, and other simil	ar debts	
	☐ Yes			Other. Specify	Collection	Attorney Las Veg	as Housing Au	

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Debto	ar 1 AMBER M RICE	Case number (if know)					
4.2	Ad Astra Recovery Serv	Last 4 digits of account number	5124	\$2,029.00			
	Nonpriority Creditor's Name 7330 W 33rd St N Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 8/12/14 Last Active 12/01/14				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	■ Other. Specify Collection	Attorney Rapid Cash 113				
4.3	Advance Group dba Rapid Cash Nonpriority Creditor's Name	Last 4 digits of account number	1731	\$2,600.00			
	8985 S. Eastern Ave. #200 Las Vegas, NV 89123	When was the debt incurred?	6/2015				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:				
	At least one of the debtors and another	Student loans	a Claim.				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	No	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify GARNISHM	• •				
4.4	Allied Collection Serv	Last 4 digits of account number	7201	\$499.00			
	Nonpriority Creditor's Name 3080 S Durango Dr Ste 20 Las Vegas, NV 89117	When was the debt incurred?	Opened 10/05/09				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collection A	Attorney Blackjack Bonding In				

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Debto	r 1 AMBER M RICE	Case number (if know)						
4.5	Carmax Auto Finance Nonpriority Creditor's Name	Last 4 digits of account number	3213	\$12,023.00				
	2040 Thalbro St Richmond, VA 23230	When was the debt incurred?	Opened 2/08/14 Last Active 12/01/15					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Automobile						
4.6	Chase Nonpriority Creditor's Name	Last 4 digits of account number	4037	\$2,172.00				
	Po Box 901003 Columbus, OH 43224	When was the debt incurred?	Opened 2/02/12 Last Active 4/24/14					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not 						
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin						
	Yes	Other. Specify Automobile						
4.7	Credit Control Corp Nonpriority Creditor's Name	Last 4 digits of account number	3249	\$0.00				
	11821 Rock Landing Dr Newport News, VA 23606	When was the debt incurred?	Opened 12/10/09 Last Active 1/28/11					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin						
	Yes	Other Specify Collection	Attorney Cox Communications L					

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Debtor	AMBER M RICE	Case number (if know)									
4.8	Emergency Medicine physicians Nonpriority Creditor's Name	Last 4 digits of account number	6385	\$200.00							
	P.O Box 14000 Belfast, ME 04915	When was the debt incurred?	9/17/2015								
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply								
	Who incurred the debt? Check one.	•	,								
	■ Debtor 1 only	☐ Contingent									
	☐ Debtor 2 only	☐ Unliquidated									
	Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not								
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts								
	□ Yes	Other. Specify									
4.9	Jefferson Capitsl Systems	Last 4 digits of account number	4400	\$1,101.56							
	Nonpriority Creditor's Name 16 McLeland Rd St. Cloud, MN 56303	When was the debt incurred?	2/27/2009								
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply								
	Who incurred the debt? Check one.										
	Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	Student loans									
	debt Is the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts								
	Yes	•	g pm.c,								
0	Lawrnce Nath Nonpriority Creditor's Name	Last 4 digits of account number	3680	\$538.00							
	3037 E Warm Spring Suite 200 Las Vegas, NV 89120	When was the debt incurred?	Opened 12/28/09								
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply								
	■ Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 									
	■ No										
	□ Yes	■ Other. Specify Collection	12 Pioneer Loan Cent								

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Debto	or 1 AMBER M RICE	Case number (if know)									
4.1	Progressive Mgmt Syste	Last 4 digits of account number	6189	\$258.00							
1	Nonpriority Creditor's Name 1521 W Cameron Ave FI 1 West Covina, CA 91790	When was the debt incurred?	Opened 6/25/13	Ψ200.00							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply								
	■ Debtor 1 only	☐ Contingent	☐ Contingent								
	☐ Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	Student loans									
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts								
	Yes	Other. Specify Collection	Attorney University Medical C								
4.1	Progressive Mgmt Syste	Last 4 digits of account number	9497	\$150.00							
	Nonpriority Creditor's Name 1521 W Cameron Ave FI 1 Wast Coving CA 91770	When was the debt incurred?	Opened 9/10/13								
	West Covina, CA 91790 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply								
	Who incurred the debt? Check one.										
	■ Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:									
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims									
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts								
	☐ Yes		Other. Specify Collection Attorney University Medical C								
4.1	Sun Loan Co	Last 4 digits of account number	9172	\$86.00							
<u> </u>	Nonpriority Creditor's Name	_									
	1600 N Nellis Blvd Ste 1 Las Vegas, NV 89115	When was the debt incurred?	Opened 10/31/12 Last Active 3/01/13								
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply								
	Who incurred the debt? Check one.										
	Debtor 1 only	☐ Contingent									
	☐ Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:								
	☐ Check if this claim is for a community debt	ration agreement or divorce that you did not									
	Is the claim subject to offset?	nation agreement of divolce that you did not									
	■ No	Debts to pension or profit-sharing	fit-sharing plans, and other similar debts								
	☐ Yes	■ Other. Specify Note Loan									

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Debto	or 1 AMBER M RICE		Case number (if know)	
4.1	UMC	Last 4 digits of account number	0192	\$2,578.75
	Nonpriority Creditor's Name 1800 w charleston blvd Las vegas, NV 89102	When was the debt incurred?	9/17/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	имс	Last 4 digits of account number	6400	\$287.35
	Nonpriority Creditor's Name 1800 w charleston blvd	When was the debt incurred?	2/1/2015	
	Las vegas, NV 89102 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	2 22 25 25 25 27 27	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Wells Fargo Bank	Last 4 digits of account number		\$300.00
0	Nonpriority Creditor's Name 420 Montgomery St.	When was the debt incurred?		******
	San Francisco, CA 94104 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Negative ba	alance	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 AMBER M RICE		Case number (if know)					
Clark County Assessor C/O Bankruptcy Clerk 500 S. Grand Central Parkway Box 551401 Las Vegas, NV 89155-1401	Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims					
Lus Vogus, IVV 00100 1401	Last 4 digits of account number						
Name and Address Clark County Treasurer c/o Bankruptcy Clerk 500 S Grand Central Pkwy Box 551220 Las Vegas, NV 89155-1220	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address Dept. of Employment, Training & Rehab Employment Security Division 500 East Third Street Carson City, NV 89713	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address Massachusetts Department of Revenue Bankruptcy Unit PO Box 9564 100 Cambridge Street, 7th Floor Boston, MA 02114-9564	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
DOSION, MA 02114-9304	Last 4 digits of account number						
Name and Address Nevada Dept. of Taxations, Bankruptcy 555 E Washington Ave, #1300 Las Vegas, NV 89101	On which entry in Part 1 or Part 2 did Line of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address Social Security Administration Office of Regional Chief Counsel, Reg IX 160 Spear Street, Suite 800	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims					
San Francisco, CA 94105-1545	Last 4 digits of account number						
Name and Address State of Nevada Dept. of Motor Vehicles Attn: Legal Division 555 Wright Way Carson City, NV 89711	On which entry in Part 1 or Part 2 did Line of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address United States Trustee 300 Las Vegas Blvd. South #4300 Las Vegas, NV 89101	On which entry in Part 1 or Part 2 did Line of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 AMBER M RICE

Case number (if know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	Ct.	Chadantilaana	6f.	Total Claim
Total	6f.	Student loans	οī.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 24,864.66
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,864.66

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Fill in this infor	mation to identify your	case:		
Debtor 1	AMBER M RICE			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number				_ 0, ,,,,,,
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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					,
Fill in this	s information to identify your	case:			
Debtor 1	AMBER M RICE				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEVADA	.		
Case num	nber				
(if known)					Check if this is an amended filing
Officia	al Form 106H				-
	dule H: Your Cod	lobtors			40/45
Scried	dule n. Your Cod	enrois			12/15
	e and case number (if known you have any codebtors? (If			as a codebtor.	<u>-</u>
■ No					
Arizo	thin the last 8 years, have youna, California, Idaho, Louisiana				states and territories include
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	sure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	9
	Name			☐ Schedule E/F, li ☐ Schedule G, line	
	Number Street	Chata	ZID Code	_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	9
	Name			☐ Schedule E/F, li ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

Fill	in this information to ider	ntify your ca	ase:				I				
Del	btor 1 AM	BER M R	ICE								
	btor 2										
Uni	ited States Bankruptcy Co	ourt for the	: DISTRICT OF NEVAL	DA							
	se number nown)						□ Ar		ed filing ent showin	g postpetition ollowing date:	•
0	fficial Form 10	<u>6l</u>					\overline{M}	M / DD/ Y	YYY		
S	chedule I: You	ur Inc	ome								12/15
spo atta	plying correct informati use. If you are separate ch a separate sheet to to the control of the c	ed and you this form.	r spouse is not filing wi	th you, do not inclu	ıde infor	mati	on about	your spo	ouse. If mo	ore space is	needed,
١.	information.	iii		Debtor 1	Debtor 1			Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with		Employment status	■ Employed				☐ Emple	•		
	information about addit employers.			☐ Not employed				☐ Not e	mployed		
	, ,	onal or	Occupation	Housekeeper							
	Include part-time, sease self-employed work.	orial, or	Employer's name	Harrahs							
	Occupation may include or homemaker, if it app		Employer's address	1 Harrahs Ct., Las Vegas, NV	89109						
			How long employed t	here? 1 week	(_			
Pai	rt 2: Give Details A	About Mor	nthly Income								
	imate monthly income a use unless you are separ		ate you file this form. If	you have nothing to ı	report for	any	line, write	\$0 in the	space. Inc	clude your noi	n-filing
	ou or your non-filing spous e space, attach a separat			ombine the information	on for all	empl	oyers for t	hat perso	on on the li	nes below. If	you need
							For Deb	tor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	2,	689.00	\$	N/A	
3.	Estimate and list mon	thly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Incom	ne. Add lir	ne 2 + line 3.		4.	\$	2,68	9.00	\$	N/A	

Deb	tor 1	AMBER M RICE			Case	e number (if known)				
					Fo	r Debtor 1			Debtor	2 or spouse	
	Сор	y line 4 here	4.		\$_	2,689.00)	\$	illing s	N/A	_
5.	List	all payroll deductions:									
٥.	5a.	Tax, Medicare, and Social Security deductions	5.	a.	\$	222.00		\$		NI/A	
	5a. 5b.	Mandatory contributions for retirement plans		a. b.	\$ \$	323.00	_	\$ —		N/A N/A	_
	5c.	Voluntary contributions for retirement plans		о. С.	\$-	0.00	_	\$—		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$-	0.00	_	\$		N/A	_
	5e.	Insurance		е.	\$	0.00	_	\$		N/A	_
	5f.	Domestic support obligations	5f		\$	0.00	_	\$		N/A	_
	5g.	Union dues	5	g.	\$	0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:		h.+	\$	0.00	_	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	323.00)	\$		N/A	_
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,366.00)	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			Φ.		_	•			
	8b.	monthly net income. Interest and dividends		a. b.	\$_ \$	0.00	_	\$		N/A N/A	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80		\$_ \$_	203.00)	\$ \$		N/A N/A	_
	8e.	Social Security		е.	\$-	0.00		\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Child SSI Benefits Pension or retirement income		f.	\$_ \$_	685.00 0.00)	\$\$		N/A N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0.00) -	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$_	888.00)	\$		N/	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		3,254.00 +	\$		N/A	= \$	3,254.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		3,234.00	<u> </u>		14/4		3,234.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your rifiends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep					-	chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	3,254.00
13.	Dov	ou expect an increase or decrease within the year after you file this form	?						l	Combi month	ned ly income
		No. Ves Evolain:									

Official Form 106I Schedule I: Your Income page 2

Debtor 1 AMBER M RICE	Fill	in this informa	tion to identify yo	our case:					
Debtor 2 Spouse, if filing) An amended filing An appelment showing pospetition chapter (\$Spouse, if filing) An appelme							Check	c if this is:	
United States Bankruptery Court for the: DISTRICT OF NEVADA MM / DD / YYYY			7				_	ū	
Case number (If known) Commonship Commo									
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing tegether, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Bart 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependent names. Daughter 5 No.	Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEVADA		<u> </u>	MM / DD / YYYY	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. In this is point case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No. Go to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No. Go to list Debtor 1 and Debtor 2. Pyes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter									
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part !	Of	ficial Fo	rm 106J				'		
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household	Sc	chedule	J: Your	Exper	ises				12/1
Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	info	rmation. If m	ore space is ne	eded, atta	ch another sheet to this				
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No				ehold					
So No No No No No No No	1.	_							
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents?				in a separ	ate household?				
2. Do you have dependents?		□N	0	·					
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter 5 Daughter 5 No No Daughter 5 No No Son 10 No No Son 11 No No No Son 11 No No No No No No No No No		□ Y	es. Debtor 2 mus	st file Offic	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
Debtor 2. Do not state the dependents names. Daughter Son Daughter Daughter Daughter Daughter Daughter Daughter Daughter Daughter Son Daughter	2.	Do you have	e dependents?	□ No					
Daughter 5			ebtor 1 and	■ Yes.					
Daughter B Party S Son 10 Pos No No Son 11 Pos Son Include expenses of people other than your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 800.00 Bon 4. \$ 800.00 About expenses 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00		Do not state	the					_	• • •
Daughter Bayers Position Son 10 Position No Son 11 Position No Son N		dependents	names.			Daughter		5	_
Son 10 Pose Yes Son 11 Pose Son 11 Son 11 Son No Son 11 Son No Son 11 Son No So						Daughter		8	
Son 11									
Son 11						Son		10	Yes
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 0.00						Son		11	
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses	3.	Do your exp	enses include		No				■ res
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues				han 🦳					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues Your expenses 4. \$ 800.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00 4. \$ 0.00	Est exp	imate your ex enses as of a	penses as of y	our bankr	uptcy filing date unless y				
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. Homeowner's association or condominium dues	the	value of sucl	n assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> \	f you know our Income		Your expe	enses
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00 4d. \$ 0.00	(011	iciai i oi iii io	, oi.,						
4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00 4d. \$ 0.00	4.					nclude first mortgage	e 4. \$		800.00
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00		If not includ	led in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00		4a. Real e	estate taxes				4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00									0.00
·								-	
	5.					me equity loans	4a. \$ 5. \$		0.00

Debtor	1 AMBER M RICE	Case num	ber (if known)	
S. U 1	ilities:			
6. 6 .		6a.	\$	190.00
6k	•	6b.	·	0.00
60		6c.		150.00
60		6d.	·	0.00
	pod and housekeeping supplies	7.	·	900.00
	nildcare and children's education costs		\$ \$	
_		8. 9.	\$	0.00
	othing, laundry, and dry cleaning		·	200.00
	ersonal care products and services	10.	·	50.00
	edical and dental expenses	11.	\$	100.00
	ansportation. Include gas, maintenance, bus or train fare.	12.	\$	150.00
	o not include car payments.	13.	· <u> </u>	
	ntertainment, clubs, recreation, newspapers, magazines, and books		·	100.00
	naritable contributions and religious donations	14.	\$	0.00
	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20. ia. Life insurance	15a.	¢	0.00
			·	0.00
	b. Health insurance	15b.	·	0.00
	ic. Vehicle insurance	15c.	· <u> </u>	151.00
	id. Other insurance. Specify:	15d.	\$	0.00
	ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
	pecify:	16.	\$	0.00
	stallment or lease payments:		•	
	'a. Car payments for Vehicle 1	17a.	·	352.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.	·	0.00
17	d. Other. Specify:	17d.	\$	0.00
d€	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. O	ther payments you make to support others who do not live with you.		\$	0.00
S	pecify:	19.	·	
0. O	ther real property expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	our Income.	
20	a. Mortgages on other property	20a.	\$	0.00
20	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	e. Homeowner's association or condominium dues	20e.	\$	0.00
	ther: Specify: Pet Care		+\$	100.00
1. 0	ret Gale		·Ψ	100.00
2. C	alculate your monthly expenses			
22	a. Add lines 4 through 21.		\$	3,243.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· ·
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,243.00
	in the man and and a series of the following opposition.			3,243.00
	alculate your monthly net income.		-	
23	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,254.00
	b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,243.00
				,
23	sc. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	11.00
	•			
	you expect an increase or decrease in your expenses within the year after yo			
	r example, do you expect to finish paying for your car loan within the year or do you expect you	r mortgage	payment to increase	or decrease because of a
_	odification to the terms of your mortgage?			
	No.			
_	Evolain here:			

Fill in Abia	information to identify						
FIII IN THIS	information to identify your	case:					
Debtor 1	AMBER M RICE	ACT III AL					
Dahtano	First Name	Middle Name	Last N	lame			
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last N	lame			
United Sta	ites Bankruptcy Court for the:	DISTRICT OF NEVADA					
0100.01.01	noo Danmapio, Countro, ano.						
Case num	ber						
(if known)					☐ Check if this is an		
					amended filing		
Official	Form 106Doo						
	Form 106Dec						
Decla	aration About a	an Individual D	Debto	r's Schedules	12/15		
	oth. 18 U.S.C. §§ 152, 1341, 1		•		000, or imprisonment for up to 20		
Did y	ou pay or agree to pay some	one who is NOT an attorney	y to help y	ou fill out bankruptcy forms?			
.	No						
п,	Yes. Name of person	ankruptcy Petition Preparer's Notice,					
				on, and Signature (Official Form 119)			
	r penalty of perjury, I declare ney are true and correct.	that I have read the summa	ry and scl	nedules filed with this declara	tion and		
X /s/ AMBER M RICE X							
	MBER M RICE			Signature of Debtor 2			
Si	ignature of Debtor 1			-			
D	ate March 3, 2016		[Date			
			_				

Official Form 106Dec

Fill	in this inforn	nation to identify you	r case:			
Del	otor 1	AMBER M RICE				
Dol	otor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA			
	se number _				_	theck if this is an mended filing
Sta Be a	as complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
		n). Answer every que			, additional pages, write yes	ii name ana oase
	-		arital Status and Where You	Lived Before		
1.	wnat is you	r current marital statu	IS?			
	□ Married■ Not mar					
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operating use received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$764.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calend (January 1 to I	dar year: December 31, 2015)	■ Wages, commissions, bonuses, tips	\$31,698.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	lar year before that: December 31, 2014)	■ Wages, commissions, bonuses, tips	\$30,805.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
List each s		se and you have income that yource separate	•	•	
		Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Describe below	(before deductions and exclusions)	Describe below.	(before deductions and exclusions)
For last calend (January 1 to I	dar year: December 31, 2015)	Unemployment	\$344.00		
Part 3: List	Certain Payments Yo	u Made Before You Filed for I	Bankruptcy		
☐ No.	Neither Debtor 1 nor	2's debts primarily consumer Debtor 2 has primarily consu		are defined in 11 U.S.C. & 1	
	individual primarily for	a personal, family, or househol		rate defined in 11 0.5.6. § 1	01(8) as "incurred by ar
	During the 90 days bet No. Go to line Yes List below	fore you filed for bankruptcy, did 7. each creditor to whom you pai	d purpose." d you pay any creditor a total d a total of \$6,225* or more ir	of \$6,225* or more?	the total amount you
	During the 90 days bet No. Go to line Yes List below paid that continct include	fore you filed for bankruptcy, did	d purpose." d you pay any creditor a total d a total of \$6,225* or more in ts for domestic support obliga- nis bankruptcy case.	of \$6,225* or more? n one or more payments and ations, such as child support	the total amount you and alimony. Also, do
■ Yes.	During the 90 days bet No. Go to line Yes List below paid that continctude * Subject to adjustment Debtor 1 or Debtor 2	fore you filed for bankruptcy, die 7. each creditor to whom you paintereditor. Do not include payments to an attorney for the	d purpose." d you pay any creditor a total d a total of \$6,225* or more in ts for domestic support obligations bankruptcy case. Is after that for cases filed on of mer debts.	of \$6,225* or more? n one or more payments and ations, such as child support or after the date of adjustments.	the total amount you and alimony. Also, do
■ Yes.	During the 90 days bet No. Go to line Yes List below paid that continctude * Subject to adjustment Debtor 1 or Debtor 2	fore you filed for bankruptcy, die 7. each creditor to whom you paintereditor. Do not include payments a payments to an attorney for the on 4/01/16 and every 3 years or both have primarily consulting you filed for bankruptcy, die 7.	d purpose." d you pay any creditor a total d a total of \$6,225* or more in ts for domestic support obligations bankruptcy case. Is after that for cases filed on of mer debts.	of \$6,225* or more? n one or more payments and ations, such as child support or after the date of adjustments.	the total amount you and alimony. Also, do
■ Yes.	During the 90 days bef No. Go to line Yes List below paid that continclude * Subject to adjustment * Subject to adjustment Debtor 1 or Debtor 2 During the 90 days bef No. Go to line Yes List below include pa	fore you filed for bankruptcy, die 7. each creditor to whom you paintereditor. Do not include payments a payments to an attorney for the on 4/01/16 and every 3 years or both have primarily consulting you filed for bankruptcy, die 7.	d purpose." d you pay any creditor a total d a total of \$6,225* or more in ts for domestic support obligations bankruptcy case. s after that for cases filed on a mer debts. d you pay any creditor a total d a total of \$600 or more and	of \$6,225* or more? n one or more payments and ations, such as child support or after the date of adjustment of \$600 or more?	the total amount you and alimony. Also, do nt.

Case number (if known)

7	Within 4 year before you filed for benjournt	av did van maka a navma	nt an a daht vari	wed envene who	aa an Inala	lov2
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which you securities; and an	u are a gener ly managing a	al partner; corporations agent, including one for
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on ac	count of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession					
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					rt or custody
	Case number					
	Rapid Cash vs. Amber Rice 14CN001731	GARNISHMENT	Justice Court, I Vegas Townshi 2332 N. Las Veg North Las Vega	ip gas Blvd	■ Pending □ On appe □ Conclude	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, garnisl	hed, attache	d, seized, or levied?
	□ No					
	Yes. Fill in the information below.					
		December the December		Dete		Value of the
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
	Carmax Auto Finance 2040 Thalbro St	2011 Chevrolet Malib	u	1/201	6	\$12,000.00
	Richmond, VA 23230	■ Property was reposses	ssed.			
		☐ Property was foreclose				
		☐ Property was garnishe	ed.			
		☐ Property was attached	d, seized or levied.			
	Chase Po Box 901003	2005 Chevrolet Uplar	nder	1/201	6	\$3,000.00
	Columbus, OH 43224	Property was reposses	ssed.			
		☐ Property was foreclose				
		☐ Property was garnishe	ed.			
		☐ Property was attached	d, seized or levied.			

Debtor 1 AMBER M RICE

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Case number (if known)

11.	Within 90 days before you filed for bank accounts or refuse to make a payment b		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any a	amounts from your
	☐ Yes. Fill in the details. Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o ■ No □ Yes		as any of your property in the possession of an a er official?	assignee for the bene	efit of creditors, a
Pai	t 5: List Certain Gifts and Contribution	าร			
13.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$60		lid you give any gifts with a total value of more t Describe the gifts	han \$600 per person? Dates you gave	? Value
	per person Person to Whom You Gave the Gift and Address:	ı		the gifts	
14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or		lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	iptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfer	s			
16.	consulted about seeking bankruptcy or	preparin	d you or anyone else acting on your behalf pay on go a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	' ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Ballstaedt Law 9555 S Eastern Ave. Ste #210 Las Vegas, NV 89123 help@bkvegas.com Debtor		Attorney Fees	2/15/16, 2/23/16, 2/26/16	\$1,237.00

Debtor 1 AMBER M RICE

Debtor 1 AMBER M RICE

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I No	or to make payments			or transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
40				_		
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No	siness or financial affai le as security (such as th	rs?			
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made
	1 crossing relationship to you					
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No Yes. Fill in the details.		property to a s	self-settled tr	ust or similar device o	of which you are a
	Name of trust	Description and va	due of the prop	arty transfor	har	Date Transfer was
	Name of trust	Description and va	ilue or the prop	erty transieri	eu	made
Par	Es: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accoun	ts; certificates o	of deposit; sl		
		ast 4 digits of account number	Type of accour instrument	clo mo	te account was osed, sold, oved, or onsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy, any	y safe deposi	t box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before y	ou filed for bankrupto	у
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?
		•				

Debtor 1 AMBER M RICE Case number (if known)

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No	Pai	t 9: Identify Property You Hold or Control for S	Someone Else			
Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Chumber, Street	23.	• • • • • • • • • • • • • • • • • • • •	ne else owns? Include any prope	rty you	borrowed from, are storing fo	r, or hold in trust
Owner's Name Address (Number, Street, City, State and ZIP Code) (Where is the property? (Code)) (Member, Street, City, State and ZIP Code) (Member, Street, City, State and ZIP Code) Environmental Law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or regulations controlling the cleanup of these substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street,		■ No				
Address (Number, Street, City, State and ZIP Code) Code Code Statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material, soil, surface water, groundwater, or other medium, including statutes or regulation controlling the cleanup of these substances, wastes, or material. Stre means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize; in luctuling disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 1 No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) A		Yes. Fill in the details.				
For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No			(Number, Street, City, State and ZIP	Desc	ribe the property	Value
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Pyes. Fill in the details. Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title No Yes. Fill in the details. Case Title Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Add	Pai	t 10: Give Details About Environmental Informa	ation			
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Str	For	the purpose of Part 10, the following definitions	apply:			
to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No		toxic substances, wastes, or material into the ai	ir, land, soil, surface water, groun			
Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No				law, w	hether you now own, operate,	or utilize it or used
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 125. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)				s waste	e, hazardous substance, toxic	substance,
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State	Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they	occurred.	
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Date of notice XIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice XIP Code) Date of noti	24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	unde	r or in violation of an environm	ental law?
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, Street, City, State and ZIP Code) Part11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)		_				
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)			Governmental unit Environmental law, if you Date Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and Know it	Date of notice		
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice	25.	Have you notified any governmental unit of any	release of hazardous material?			
Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7: Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)		_				
No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Case Number Case Number Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case About Your Business or Connections to Any Business The following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)			Address (Number, Street, City, State an			Date of notice
☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)	26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironme	ental law? Include settlements	and orders.
Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)		■ No				
Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)		☐ Yes. Fill in the details.				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)			Name Address (Number, Street, City,	Natu	re of the case	
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)	Pai	t 11: Give Details About Your Business or Con	nections to Any Business			
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)	27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	ny of th	ne following connections to an	y business?
_		☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	, either	full-time or part-time	
_		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLI	P)	
i de la companya de production de la companya de l		_	, ,, p		,	
☐ An officer, director, or managing executive of a corporation			ive of a corporation			
☐ An owner of at least 5% of the voting or equity securities of a corporation		_	•			

Official Form 107

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Case number (if known)

	-		
	No. None of the above applies. Go to IYes. Check all that apply above and fill	ant 12.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	ccy, did you give a financial statement to an	yone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t		false statement, concealing property, or ok	declare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.
/s/	AMBER M RICE		
	BER M RICE nature of Debtor 1	Signature of Debtor 2	
Dat	March 3, 2016	Date	
Did ; ■ N □ Y		ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
'	ou pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	r forms?
	-	orton Ballian Brown and Malian Ball all	10'mature (0"'': 15 Farm 440)
ЦΥ	es. Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declaration, a	na Signature (Official Form 119).

Debtor 1 AMBER M RICE

Fill in this infor	mation to identify your	case:		
Debtor 1	AMBER M RICE	M. I		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NE	VADA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Stateme	nt of Intentio	n for Indiv	iduals Filing Under C	hapter 7 12/15
			<u> </u>	.2.0
If you are an ind	ividual filing under cha	pter 7, you must fil	out this form if:	
creditors hav	e claims secured by yo	ur property, or		
	sed personal property a			h
				he date set for the meeting of creditors, pies to the creditors and lessors you list
on the	form			
•		r in a joint case, bo	th are equally responsible for supplying	correct information. Both debtors must
sign ar	nd date the form.			
	and accurate as possib our name and case nu		needed, attach a separate sheet to this	form. On the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
-			One different Miles Harris Obstinue Occurred to	Provide (Official Forms 400D) (Illing)
information be	•	art 1 of Schedule D	Creditors who have Claims Secured by	y Property (Official Form 106D), fill in the
Identify the cr	editor and the property t	hat is collateral	What do you intend to do with the pro secures a debt?	pperty that Did you claim the property as exempt on Schedule C?
			secures a debt?	as exempt on schedule C?
Creditor's A	Autoworld Sales and	Leasing	☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
	2010 Dodge Journ	ey 120000	Reaffirmation Agreement.	
property	miles		Retain the property and [explain]:	
securing debt	:		Retain and Make Regular Payme	ents
Part 2: List Y	our Unexpired Persona	l Property Leases		
For any unexpire	ed personal property le	ase that you listed	in Schedule G: Executory Contracts and	Unexpired Leases (Official Form 106G), fill
			he trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended § 365(p)(2).
				Will de la
Describe your t	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea Property:	ased			D V
r roporty.				☐ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
: 2F 21.77				Li Tes
Lessor's name:				□ No
Official Form 108		Statement of In	tention for Individuals Filing Under Cha	pter 7 page

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Debtor 1 AMBER M RICE	Case number (if known)
Description of leased Property:	☐ Yes
	2 163
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any p property that is subject to an unexpired lease.	roperty of my estate that secures a debt and any personal
X /s/ AMBER M RICE X	
=	ture of Debtor 2
Signature of Debtor 1	
Date March 3, 2016 Date	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

In re	re AMBER M RICE		Case N	lo.	
		Debtor(s)	Chapte	er 7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	DRNEY FOR	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto or in connection with the b	cy, or agreed to be p ankruptcy case is as	aid to me, for serv	
	For legal services, I have agreed to accept		\$	1,237.00	<u>)</u>
	Prior to the filing of this statement I have received		\$	1,237.00	<u>)</u>
	Balance Due		\$	0.00	<u>)</u>
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	on unless they are m	embers and associ	iates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				of my law firm. A
6.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspe	ects of the bankrupto	cy case, including	:
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, statenc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan whi	ch may be required	;	n bankruptcy;
7.	By agreement with the debtor(s), the above-disclosed fee of Negotiations with secured creditors to recand/or reaffirmations. Representation of the relief from stay actions or any other adversarials.	duce to market value p he debtors in any discl	ursuant to 506(a)		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement	for payment to me for	or representation o	of the debtor(s) in
_	March 3, 2016	/s/ Seth Ballsta			
1	Date	Seth Ballstaedt Signature of Attor			_
		Ballstaedt Law	ney		
		9555 S Eastern			
		Las Vegas, NV (702) 715-0000	09123		
		help@bkvegas	.com		
		Name of law firm			

United States Bankruptcy CourtDistrict of Nevada

		District of Nevaua		
ı re	AMBER M RICE		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR I	MATRIX	
. 1.	The second Delegation of the second			Clindron Land Labor
ab	ove-named Debtor nereby verific	es that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ate:	March 3, 2016	/s/ AMBER M RICE		
		AMBER M RICE		

Signature of Debtor

AMBER M RICE 2630 E Cheyenne Ave., #272 North Las Vegas, NV 89030

Seth Ballstaedt, Esq. Ballstaedt Law 9555 S Eastern Ave. Ste #210 Las Vegas, NV 89123

Aargon Collection Agen Acct No xxxxxx2177 8668 Spring Mountain Rd Las Vegas, NV 89117

Ad Astra Recovery Serv Acct No xxx5124 7330 W 33rd St N Ste 118 Wichita, KS 67205

Advance Group dba Rapid Cash Acct No xxxxxx1731 8985 S. Eastern Ave. #200 Las Vegas, NV 89123

Allied Collection Serv Acct No xxxxx7201 3080 S Durango Dr Ste 20 Las Vegas, NV 89117

Autoworld Sales and Leasing Acct No 6329 1562 N Nellis Blvd., Las Vegas, NV 89110

Carmax Auto Finance Acct No xxxx3213 2040 Thalbro St Richmond, VA 23230

Chase
Acct No xxxxxxxx4037
Po Box 901003
Columbus, OH 43224

Clark County Assessor C/O Bankruptcy Clerk 500 S. Grand Central Parkway Box 551401 Las Vegas, NV 89155-1401

Clark County Treasurer c/o Bankruptcy Clerk 500 S Grand Central Pkwy Box 551220 Las Vegas, NV 89155-1220 Credit Control Corp Acct No xxxxxx3249 11821 Rock Landing Dr Newport News, VA 23606

Dept. of Employment, Training & Rehab Employment Security Division 500 East Third Street Carson City, NV 89713

Emergency Medicine physicians Acct No xxxxxxxx6385 P.O Box 14000 Belfast, ME 04915

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Jefferson Capitsl Systems Acct No xxx44.00 16 McLeland Rd St. Cloud, MN 56303

Lawrnce Nath
Acct No xxxxxxxxxxxx3680
3037 E Warm Spring Suite 200
Las Vegas, NV 89120

LR 2002 & Fed Rules 5003 notice address

Massachusetts Department of Revenue Bankruptcy Unit PO Box 9564 100 Cambridge Street, 7th Floor Boston, MA 02114-9564

Nevada Dept. of Taxations, Bankruptcy 555 E Washington Ave, #1300 Las Vegas, NV 89101

Progressive Mgmt Syste Acct No xxxx6189 1521 W Cameron Ave Fl 1 West Covina, CA 91790

Progressive Mgmt Syste Acct No xxxx9497 1521 W Cameron Ave Fl 1 West Covina, CA 91790 Social Security Administration Office of Regional Chief Counsel, Reg IX 160 Spear Street, Suite 800 San Francisco, CA 94105-1545

State of Nevada Dept. of Motor Vehicles Attn: Legal Division 555 Wright Way Carson City, NV 89711

Sun Loan Co Acct No 9172 1600 N Nellis Blvd Ste 1 Las Vegas, NV 89115

UMC

Acct No xxxxxxx0192 1800 w charleston blvd Las vegas, NV 89102

UMC

Acct No xxxx64.00 1800 w charleston blvd Las vegas, NV 89102

United States Trustee 300 Las Vegas Blvd. South #4300 Las Vegas, NV 89101

Wells Fargo Bank 420 Montgomery St. San Francisco, CA 94104